PART B - FEE(S) TRANSMITTAL

MAY 0 1 2006	this form, together w	ith applicable		Commissioner f P.O. Box 1450	E FEE or Patents ginia 22313-1450	
INSTRUCTIONS: Phis for appropriate. All afficher con redicated unless porrected in the propriet of the propriet and the propr	rm should be used for tran rrespondence including the below or directed otherwise ns.	smitting the ISSU Patent, advance or in Block 1, by (a	E FEE and PUBLI ders and notification) specifying a new of	CATION FEE (if rec of maintenance fees correspondence addres	uired). Blocks 1 through 5 s will be mailed to the current s; and/or (b) indicating a sep-	hould be completed where correspondence address as arate "FEE ADDRESS" for
	CE ADDRESS (Note: Use Block 1 for			Note: A certificate of Fee(s) Transmittal. T papers. Each addition	f mailing can only be used for his certificate cannot be used a hal paper, such as an assignment te of mailing or transmission.	or domestic mailings of the for any other accompanying
34704 75 BACHMAN & L 900 CHAPEL STR SUITE 1201 NEW HAVEN, CT	REET			I hereby certify that States Postal Service addressed to the Matransmitted to the US	ertificate of Mailing or Trans this Fee(s) Transmittal is being with sufficient postage for fir il Stop ISSUE FEE address PTO (571) 273-2885, on the d	emission g deposited with the United st class mail in an envelope above, or being facsimile late indicated below.
02/2006 EAREGAY2 0000				Rachel Pis	intelli	(Depositor's name)
FC:1501 FC:1504			April 27,	2006	(Signature)	
APPLICATION NO.	FILING DATE	FIRST NAMED IN		NTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE P	UBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	1	\$300	\$1700	05/30/2006
EXAMINER		ART UNIT		LASS-SUBCLASS]	
BRYANT	, DAVID P	3726		029-771000		
"Fee Address" indicat PTO/SB/47; Rev 03-02 of Number is required. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN		ation form e of a Customer E PRINTED ON T clow, no assignee of this form is NOT	registered attorne 2 registered paten listed, no name w THE PATENT (print data will appear on a substitute for filin (B) RESIDENCE: (or type) the patent. If an assig an assignment. CITY and STATE OR	nes of up to f no name is 3nee is identified below, the d	ocument has been filed for
				☐ Individual 🚨	Corporation or other private gro	oup entity Government
Please check the appropriate						
a. The following fee(s) are Issue Fee	mall entity discount permitte		Payment by cred	mount of the fee(s) is e it card. Form PTO-203 ereby authorized by ch Number 12 - 11	8 is attached.	dit any overpayment, to a cony of this form).
a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # of Change in Entity Status a. Applicant claims Sl	mall entity discount permitter F Copies 10 (from status indicated above	d)))) CFR 1.27.	A check in the an Payment by cred The Director is h Deposit Account b. Applicant is no	it card. Form PTO-20: ereby authorized by ch Number ()2-()1	8 is attached. arge the required fee(s), or cre 34 (enclose an extr	FR 1.27(g)(2).
a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # of Change in Entity Status a. Applicant claims Sl	mall entity discount permitter F Copies 10 (from status indicated above	d)))) CFR 1.27.	A check in the an Payment by cred The Director is h Deposit Account b. Applicant is no	it card. Form PTO-20: ereby authorized by ch Number ()2-()1	8 is attached. arge the required fee(s), or cre 34 (enclose an extr	FR 1.27(g)(2).
a. The following fee(s) are Issue Fee Publication Fee (No s Advance Order - # of Change in Entity Status a. Applicant claims Sl	from status indicated above MALL ENTITY status. See is requested to apply the last ublication Fee (if required) words of the United States Pate	CFR 1.27. The Fee and Publicate Number of Trademark	A check in the an Payment by cred The Director is h Deposit Account b. Applicant is no	it card. Form PTO-20: ereby authorized by ch Number 02-01 o longer claiming SMA re-apply any previoushan the applicant; a re-	8 is attached. arge the required fee(s), or cre 34 (enclose an extr ALL ENTITY status. See 37 C. tly paid issue fee to the application or the state of the state	FR 1.27(g)(2).
Aa. The following fee(s) are Signature Chair Signature Advance Order - # of Signature Authorized Signature Typed or printed name	from status indicated above MALL ENTITY status. See is requested to apply the Issublication Fee (if required) words of the United States Pater	CFR 1.27. The Fee and Publicate Minot be accepted and Trademark	A check in the an Payment by cred The Director is h Deposit Account b. Applicant is n ion Fee (if any) or to from anyone other to	it card. Form PTO-20: ereby authorized by ch Number 02-01 o longer claiming SMA re-apply any previous han the applicant; a re Date Ap	8 is attached. arge the required fee(s), or cre 34 (enclose an extr ALL ENTITY status. See 37 C. thy paid issue fee to the application or the state of the state	FR 1.27(g)(2). tion identified above. te assignee or other party in